

STATE OF WASHINGTON  
**APPLICATION FOR CHANGE/TRANSFER  
OF WATER RIGHT**

RECEIVED

JUN 10 2010

DEPARTMENT OF ECOLOGY  
REGIONAL OFFICE

For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF  
ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.)

- ☐ Change purpose(s) of use  
☐ Add purpose(s) of use  
☒ Change point(s) of diversion/withdrawal  
☐ Add point(s) of diversion/withdrawal  
☒ Change/transfer place of use  
☐ Other (i.e. consolidation, intertie, trust water)

Explain: \_\_\_\_\_

**FOR OFFICE USE ONLY**

CHANGE No. WALL-10-04 WRIA \_\_\_\_\_

DATE ACCEPTED 6/2/10 BY \_\_\_\_\_

FEE \$ 500.00 REC'D 6/2/10

CHECK No. 1807

ECY Coding: 001-002-WR10285-000011

SEPA: ☐ Exempt ☐ Not exempt

**\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\***

**1. Applicant Information:**

APPLICANT/BUSINESS NAME Carson & Cole, LLC (Attn: Rob Schmidt)	PHONE NO. ( )	FAX NO. ( )
ADDRESS 106 N. 2 <sup>nd</sup> Street		
CITY Walla Walla	STATE WA	ZIP CODE 99362

CONTACT NAME (IF DIFFERENT FROM ABOVE) John Fazio	PHONE NO. (541) 938-6084	FAX NO. ( )
ADDRESS PO Box 246		
CITY Milton-Freewater	STATE OR	ZIP CODE 97862

**2. Water Right Information:**

WATER RIGHT OR CLAIM NUMBER Ground Water Certificate No. G3-27490C	RECORDED NAME(S) Rea Baumann
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

**Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.**

**FOR OFFICE USE ONLY**

APP. NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ CERT. NO. \_\_\_\_\_ CERT. OF CHANGE NO. \_\_\_\_\_

CG3-27490C(2) 4684062



3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A well (basalt aquifer)		S½	nW	24	7	33	330724110006	

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
A well (basalt aquifer0		SE	SW	21	7	35	350721220002	AAC 699

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO      PROPOSED: ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use: No Change Proposed

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

The SE¼ of Sec. 23; the SW¼ and W½SE¼ of Sec. 24, ALL WITHIN T. 7 N., R. 33 E.W.M.

(Land to be removed from irrigation: The W½SE¼ of Sec. 23, T. 7 N., R. 33 E.W.M.)

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		23/24	7	33 E	Walla Walla	Various	400

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

Seventy (70) acres within the following legal description;

The SE¼SW¼ of Sec. 21, T. 7 N., R. 35 E.W.M., ALSO, the N½N½ of Sec. 28, T. 7 N., R. 35 E.W.M., LESS Highway right-of-way.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		21/28	7	35 E	Walla Walla		70

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

☐ YES ☒ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): \_\_\_\_\_



**6. Remarks and Other Relevant Information:**

This change application requests a change in place of use and point of withdrawal for 70 acres of water right under Ground Water Certificate No. G3-27490C. This is a permanent request for the same change authorized through a 2010 seasonal change , with the exception that additional instantaneous quantity is being requested in this application. The total quantities proposed for this change are 420 gallons per minute, 325.5 acre-feet per year, for the seasonal irrigation of 70 acres.

IF FOR SEASONAL OR TEMPORARY, START DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ END DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.


**7. Signatures:**

*I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.*



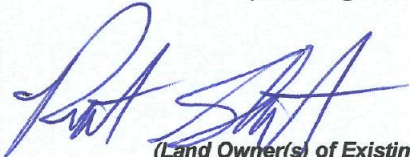
(Applicant)

5/28/10  
(Date)



(Water Right Holder)

5/28/10  
(Date)



(Land Owner(s) of Existing Place of Use)

5/28/10  
(Date)

**IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.**

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

- ☐ APPLICATION FEE NOT ENCLOSED      ☐ MAP NOT INCLUDED or INCOMPLETE  
☐ ADDITIONAL SIGNATURES REQUIRED      ☐ SECTION \_\_\_\_\_ IS INCOMPLETE  
☐ OTHER/EXPLANATION: \_\_\_\_\_

**STAFF:** \_\_\_\_\_ **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_